Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your	Carol First name D Middle name Thomas	First name Middle name
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7587	

Official Form 101

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	30 Greenwood Avenue	If Debtor 2 lives at a different address:
		Mansfield, OH 44907 Number, Street, City, State & ZIP Code Richland	Number, Street, City, State & ZIP Code
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Del	btor 1 Carol D Thomas				Case number (if known)			
Pai	rt 2: Tell the Court About	Your Bankruptcy	Case					
7.	The chapter of the Bankruptcy Code you are			each, see <i>Notice Required by</i> age 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing e box.	for Bankruptcy		
	choosing to file under	■ Chapter 7						
		☐ Chapter 11						
		☐ Chapter 12						
		☐ Chapter 13						
8.	How you will pay the fee	about how order. If yo a pre-printe	you may pay. Typica ur attorney is submit ed address.	ally, if you are paying the fee yo ting your payment on your beha	k with the clerk's office in your local cou ourself, you may pay with cash, cashier' alf, your attorney may pay with a credit	s check, or money card or check with		
		I need to pay the fee in installments. If you choose this option, sign and attach the <i>Application for Individuals to Pay The Filing Fee in Installments</i> (Official Form 103A).						
		I request to but is not reapplies to y	hat my fee be waive equired to, waive you your family size and y	ed (You may request this option if fee, and may do so only if yo you are unable to pay the fee in	n only if you are filing for Chapter 7. By ur income is less than 150% of the offic n installments). If you choose this optior cial Form 103B) and file it with your peti	cial poverty line that n, you must fill out		
9.	Have you filed for bankruptcy within the last 8 years?	■ No.						
		☐ Yes.						
		Distric	ct	When	Case number			
		Distric	et	When				
		Distric	ct	When	Case number			
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
		Debto	r		Relationship to you			
		Distric		When	Case number, if known			
		Debto			Relationship to you			
		Distric	ct	When	Case number, if known			
11.	Do you rent your	□ No. Go t	o line 12.					
	residence?	■ Yes. Has	your landlord obtaine	ed an eviction judgment agains	t you?			
		•	No. Go to line 12.					
			Yes. Fill out <i>Initia</i> bankruptcy petitic		Judgment Against You (Form 101A) and	d file it with this		

Official Form 101

Page 3 of 68

A sole probusiness of an individual separate las a corporatrershill fyou have sole propriseparate sit to this possible.	prietorship is a you operate as ual, and is not a legal entity such oration, ip, or LLC. e more than one rietorship, use a sheet and attach	■ No. □ Yes.	Go to Name Name	Health Care Busi Single Asset Rea	siness ate & ZIP Code ox to describe your business: iness (as defined in 11 U.S.C. § 101(27A)) Il Estate (as defined in 11 U.S.C. § 101(51B))
A sole probusiness yan individual separate las a corporattershi lf you have sole propriseparate sit to this possible. A re you file.	prietorship is a you operate as ual, and is not a legal entity such oration, ip, or LLC. e more than one rietorship, use a sheet and attach	■ No.	Name Numb Check	Part 4. and location of but of business, if any er, Street, City, State the appropriate be Health Care Busingle Asset Rea	siness ate & ZIP Code ox to describe your business: iness (as defined in 11 U.S.C. § 101(27A)) Il Estate (as defined in 11 U.S.C. § 101(51B))
A sole probusiness yan individuseparate las a corpo partnershi lf you have sole propriseparate sit to this possible. Are you fi	oprietorship is a you operate as ual, and is not a legal entity such oration, ip, or LLC. e more than one rietorship, use a sheet and attach	☐ Yes.	Name Numb	er, Street, City, State the appropriate be Health Care Busi	ate & ZIP Code ox to describe your business: iness (as defined in 11 U.S.C. § 101(27A)) Il Estate (as defined in 11 U.S.C. § 101(51B))
business y an individual separate I as a corpor partnershi If you have sole propriseparate sit to this possible. Are you file.	you operate as ual, and is not a legal entity such pration, ip, or LLC. e more than one rietorship, use a sheet and attach		Numb	er, Street, City, Sta k the appropriate be Health Care Busi Single Asset Rea	ate & ZIP Code ox to describe your business: ness (as defined in 11 U.S.C. § 101(27A)) Il Estate (as defined in 11 U.S.C. § 101(51B))
an individed separate I as a corpor partnershing If you have sole propreseparate is it to this personal to the separate of the	ual, and is not a legal entity such pration, ip, or LLC. e more than one rietorship, use a sheet and attach		Numb	er, Street, City, Sta k the appropriate be Health Care Busi Single Asset Rea	ate & ZIP Code ox to describe your business: ness (as defined in 11 U.S.C. § 101(27A)) Il Estate (as defined in 11 U.S.C. § 101(51B))
sole propr separate s it to this po	rietorship, use a sheet and attach		Check	k the appropriate be Health Care Busi Single Asset Rea	ox to describe your business: ness (as defined in 11 U.S.C. § 101(27A)) Il Estate (as defined in 11 U.S.C. § 101(51B))
it to this po				Health Care Busi Single Asset Rea	ness (as defined in 11 U.S.C. § 101(27A)) Il Estate (as defined in 11 U.S.C. § 101(51B))
				Single Asset Rea	ll Estate (as defined in 11 U.S.C. § 101(51B))
				· ·	
			_	Stockbroker (as o	
				(3.5	defined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
					a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedu
For a defir	nition of small	No.	ı am r	ot filing under Cha	pter 11.
business of U.S.C. § 1	debtor, see 11 101(51D).	□ No.	I am fi Code.	•	11, but I am NOT a small business debtor according to the definition in the Bankrupto
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Cod
art 4: Repo	ort if You Own or	Have Any	Hazardo	ous Property or Ar	ny Property That Needs Immediate Attention
	wn or have any	■ No.			
alleged to	that poses or is pose a threat ent and le hazard to	☐ Yes.	What is	the hazard?	
public he Or do you property	alth or safety? u own any that needs e attention?			liate attention is why is it needed?	
perishable livestock t	ple, do you own e goods, or that must be fed, ing that needs		Where is	s the property?	
urgent rep	pairs?				Number, Street, City, State & Zip Code

Debtor 1 Carol D Thomas Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

Deb	tor 1 Carol D Thomas				Case number (if known)	
ar	6: Answer These Questi	ions for Re	eporting Purposes				
6.	What kind of debts do you have?	16a.	Are your debts primarily of individual primarily for a per			d in 11 U.S.C. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily be money for a business or inv				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you	owe that are not consum	ner debts or business of	debts	
7.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.			
Do you estimate that after any exempt property is excluded and administrative expenses		■ Yes.	I am filing under Chapter 7. are paid that funds will be a			ry is excluded and administrative expenses	
	are paid that funds will be available for distribution to unsecured creditors?		□ Yes				
8.	How many Creditors do you estimate that you owe?	☐ 1-49 ■ 50-99 ☐ 100-19 ☐ 200-99	99	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,00		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000	
9.	How much do you estimate your assets to be worth?	□ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - □ \$10,000,001 □ \$50,000,001 □ \$100,000,000	- \$50 million - \$100 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion	
20.	How much do you estimate your liabilities to be?	□ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - □ \$10,000,001 □ \$50,000,001 □ \$100,000,00	- \$50 million - \$100 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion	
ar	7: Sign Below						
or	you	I have ex	amined this petition, and I de	eclare under penalty of pe	erjury that the informa	tion provided is true and correct.	
						nder Chapter 7, 11,12, or 13 of title 11, ose to proceed under Chapter 7.	
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request	relief in accordance with the	chapter of title 11, Unite	d States Code, specifi	ed in this petition.	
		bankrupto and 3571	cy case can result in fines up			property by fraud in connection with a urs, or both. 18 U.S.C. §§ 152, 1341, 1519,	
		Carol D	Thomas e of Debtor 1		Signature of Debtor 2		
		Executed	February 17, 2020 MM / DD / YYYY		Executed on MM / I	DD / YYYY	

Debtor 1 C	Carol D Thomas	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Rebecca K. Hockenberry	Date	February 17, 2020
Signature of Attorney for Debtor		MM / DD / YYYY
Rebecca K. Hockenberry		
Thompson & Hockenberry Co., LPA		
Firm name		
371 Lexington Avenue		
Mansfield, OH 44907		
Number, Street, City, State & ZIP Code		
Contact phone (419) 522-5297	Email address	rebecca@attyTH.com
0074930 OH		
Bar number & State		

Fill	in this information	to identify your	case:				
		ol D Thomas					
Det	First I	Name	Middle Name	Last Name			
1	use if, filing) First I	Name	Middle Name	Last Name			
Uni	ted States Bankruptc	y Court for the:	NORTHERN DISTRIC	CT OF OHIO			
						– 0	
(IT KI	own)					_	if this is an led filing
Of	ficial Form 1	06Sum					
				nd Certain Statistical Inf			2/15
info	rmation. Fill out all or original forms, you	of your scheduler in must fill out a	es first; then complete	le are filing together, both are equall the information on this form. If you a ck the box at the top of this page.			
						Your as	ssets
							f what you own
1.	Schedule A/B: Pro	perty (Official Fo	orm 106A/B)			\$	0.00
				3		\$	3,690.00
	1c. Copy line 63, To	otal of all property	y on Schedule A/B			\$	3,690.00
Par		our Liabilities					·
ı aı	CZ. Cummunze i	our Liabilities				Your lia	hilities
							you owe
2.			laims Secured by Proper mn A, Amount of claim, a	ty (Official Form 106D) at the bottom of the last page of Part 1 c	of Schedule D	\$	241.00
3.	Schedule E/F: Cred 3a. Copy the total of	ditors Who Have claims from Part	Unsecured Claims (Office 1 (priority unsecured claims)	ial Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>		\$	633.00
	3b. Copy the total of	claims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedule E/F		\$	69,722.33
				You	r total liabilities	\$	70,596.33
Par	t 3: Summarize Y	our Income and	Expenses				
4.	Schedule I: Your In Copy your combine			ile I		\$	916.00
5.	Schedule J: Your E Copy your monthly					\$	915.90
Par	t 4: Answer Thes	e Questions for	Administrative and Sta	atistical Records			
6.			er Chapters 7, 11, or 13 on this part of the form.	? Check this box and submit this form to	the court with yo	ur other sch	edules.
7.	■ Yes What kind of debt	do you have?					
				r debts are those "incurred by an individ		a personal,	family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum

page 1 of 2

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Best Case Bankruptcy

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$_____133.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	ı
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	633.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	633.00

Fill in this info	rmation to identify your o	case and this filing:			
Debtor 1	Carol D Thomas First Name	Middle Name	Last Name		
Debtor 2	i list Name	Wildlie Name	Lastivallie		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT OF O	HIO		
Case number	-				
Case Humber					☐ Check if this is an amended filing
					ŭ
Official E	orm 106A/B				
Schedu	le A/B: Prop	erty			12/15
think it fits best.	Be as complete and accuratore space is needed, attach a	items. List an asset only once. e as possible. If two married pec a separate sheet to this form. On	ple are filing together, both a	re equally responsible for sur	plying correct
Part 1: Describ	e Each Residence, Building,	Land, or Other Real Estate You	Own or Have an Interest In		
1. Do you own or	have any legal or equitable	interest in any residence, building	ng, land, or similar property?		
.					
No. Go to Pa					
☐ Yes. Where	is the property?				
Part 2: Describ	e Your Vehicles				
3. Cars, vans, t□ No■ Yes	rucks, tractors, sport uti	lity vehicles, motorcycles			
3.1 Make:	Dodge	Who has an interest in	the property? Check one	Do not deduct secured cla	ims or exemptions. Put
Model:	Calber	Debtor 1 only	the property: Check one	the amount of any secured Creditors Who Have Clain	
Year:	2008	Debtor 2 only		Current value of the	Current value of the
Approxima	ate mileage: 1300		2 only	entire property?	portion you own?
Other info	rmation:	At least one of the de	ebtors and another		
		Check if this is com	munity property	\$2,950.00	\$2,950.00
Examples: Bo ■ No □ Yes 5 Add the dol pages you h	lar value of the portion y nave attached for Part 2.	'Vs and other recreational venal watercraft, fishing vessels, ou own for all of your entries write that number herehold Items	snowmobiles, motorcycle ac	y entries for	\$2,950.00 Surrent value of the ortion you own?
				Ď	o not deduct secured

Official Form 106A/B Schedule A/B: Property page 1

D	ebtor 1	Carol D Thomas	Case number (if known)	
6.		old goods and furnishings es: Major appliances, furniture, linens, china, kitchenware		
	Yes.	Describe		
		Household goods and furnishings		\$15.00
		Troussileia goode and runnishinge		
7.	Electron Example	es: Televisions and radios; audio, video, stereo, and digital equip including cell phones, cameras, media players, games	ment; computers, printers, scanners; music c	ollections; electronic devices
		Describe		
8.		oles of value es: Antiques and figurines; paintings, prints, or other artwork; boo other collections, memorabilia, collectibles	ks, pictures, or other art objects; stamp, coin,	or baseball card collections;
		Describe		
9.	Example	ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; b musical instruments	oicycles, pool tables, golf clubs, skis; canoes a	and kayaks; carpentry tools;
	■ No □ Yes.	Describe		
10.	■ No	ns les: Pistols, rifles, shotguns, ammunition, and related equipment Describe		
11.	Clothes Examp		accessories	
		Clothes		\$50.00
12.	□ No	y oles: Everyday jewelry, costume jewelry, engagement rings, wedden Describe	ling rings, heirloom jewelry, watches, gems, g	gold, silver
		Jewelry		\$100.00
13	Examp ■ No	rm animals bles: Dogs, cats, birds, horses Describe		
14.	Any oth	ner personal and household items you did not already list, in	cluding any health aids you did not list	
	☐ Yes.	Give specific information		
15		he dollar value of all of your entries from Part 3, including ar art 3. Write that number here		\$165.00
Pa	art 4: Des	scribe Your Financial Assets		

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured

Official Form 106A/B page 2 Schedule A/B: Property

Deptor 1	Carol D Inomas		Case number	(IT KNOWN)
				claims or exemptions.
I6. Cash <i>Exan</i> □ No		our wallet, in your home	in a safe deposit box, and on hand when you file y	our petition
Yes	i			
			Cash	\$0.00
			s; certificates of deposit; shares in credit unions, bron the same institution, list each.	okerage houses, and other similar
□ No			Institution name:	
■ Yes	i			
	17.1.		Acceptance Now Prepaid Card - negative balance	/e \$0.00
<i>Exam</i> ■ No	s, mutual funds, or public nples: Bond funds, investme		age firms, money market accounts	
19. Non-p joint ■ No	oublicly traded stock and venture	interests in incorporat	ed and unincorporated businesses, including a	n interest in an LLC, partnership, and
	s. Give specific information Na	about them me of entity:	% of ownersh	nip:
Nego Non-i	otiable instruments include	personal checks, cashie	ole and non-negotiable instruments s' checks, promissory notes, and money orders. er to someone by signing or delivering them.	
■ No □ Yes	s. Give specific information lss	about them uer name:		
Exam	ement or pension accoun nples: Interests in IRA, ERI		o), thrift savings accounts, or other pension or profit	t-sharing plans
■ No □ Yes	s. List each account separa Type	tely. of account:	Institution name:	
Your		ts you have made so tha	t you may continue service or use from a company lic utilities (electric, gas, water), telecommunication	
	š		Institution name or individual:	
			Security Depsit to Landlord	\$575.00
■ No		dic payment of money to	you, either for life or for a number of years)	
	sts in an education IRA, i S.C. §§ 530(b)(1), 529A(b),		fied ABLE program, or under a qualified state tu	uition program.
■ No □ Yes	Institution i	name and description. S	eparately file the records of any interests.11 U.S.C.	§ 521(c):
		rests in property (othe	than anything listed in line 1), and rights or po	wers exercisable for your benefit
	s. Give specific information	about them		
Official Fo	rm 106A/B	S	chedule A/B: Property	page

Best Case Bankruptcy

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D	ו וטוטנ	Carol D Inomas		Case number (if known)	
26		, copyrights, trademarks, trade s les: Internet domain names, website			
	■ No	Give specific information about the	m		
		·			
27.		es, franchises, and other general les: Building permits, exclusive licer		ldings, liquor licenses, professional licens	es
		Give specific information about the	m		
М	oney or p	property owed to you?			Current value of the
					portion you own? Do not deduct secured claims or exemptions.
28	Tax ref	unds owed to you			
	☐ Yes. (Give specific information about then	n, including whether you already	filed the returns and the tax years	
29	Family		spousal support, child support,	maintenance, divorce settlement, property	settlement
	■ No	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,	
	☐ Yes. (Give specific information			
30		mounts someone owes you les: Unpaid wages, disability insura benefits; unpaid loans you mad		, sick pay, vacation pay, workers' compe	nsation, Social Security
	■ No □ Yes.	Give specific information	ac to someone cisc		
31.		s in insurance policies les: Health, disability, or life insuran	nce; health savings account (HSA	s); credit, homeowner's, or renter's insurar	nce
	■ No	dana (b. 1	ale and Paris and Parish and the		
	□ Yes. i	Name the insurance company of ea Company nar		Beneficiary:	Surrender or refund value:
32	If you a	erest in property that is due you to re the beneficiary of a living trust, en he has died.		ance policy, or are currently entitled to rec	eive property because
	■ No □ Yes.	Give specific information			
33.	_Examp	against third parties, whether or les: Accidents, employment dispute			
	■ No □ Yes.	Describe each claim			
34	Other c	ontingent and unliquidated claim	ns of every nature, including co	ounterclaims of the debtor and rights to	set off claims
		Describe each claim			
35	Any fin	ancial assets you did not already	list		
	_	Give specific information			
36				ntries for pages you have attached	\$575.00
	_			·	

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

page 4

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Official Form 106A/B

Schedule A/B: Property

Deb	tor 1 Carol D Thomas		Case number (if known)	
87. C	o you own or have any legal or equitable interest in any business-relat	ed property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
16. I	Oo you own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
	■ No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That You	u Did Not List Abovo		
ган	7. Describe All Property Tod Own of Have all little est in That To	u Diu Not List Above		
	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership	?		
_	No			
	Yes. Give specific information			
	•		_	
54.	Add the dollar value of all of your entries from Part 7. Write the	at number here		\$0.00
Part	8: List the Totals of Each Part of this Form		L	
. art	c. List the rotals of Edon't dit of this roth			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$2,950.00		
57.	Part 3: Total personal and household items, line 15	\$165.00		
58.	Part 4: Total financial assets, line 36	\$575.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$3,690.00	Copy personal property to	stal \$3,690.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$3,690.00

Official Form 106A/B Schedule A/B: Property page 5

Fill in this inforn	Fill in this information to identify your case:							
Debtor 1	Carol D Thomas							
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF OHIO					
Case number					☐ Check if this is an amended filing			
					amenaea iiing			

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemp	tions are v	ou claiming?	Check one only	even if	vour spouse is	filina v	vith v	MI.
٠.	William Set of excilip	riioiio aic y	ou olullilling.	Officer office offig	, CVCII II	your spouse is	minig vi	vicii y	ou.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	portion you own	Amou	nt of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check	only one box for each exemption.	
2008 Dodge Calber 130000 miles Line from Schedule A/B: 3.1	\$2,950.00	•	\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(2)
Line from Generale AVB. G.1			100% of fair market value, up to any applicable statutory limit	2020.00(/1)(2)
Household goods and furnishings Line from Schedule A/B: 6.1	\$15.00		\$15.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Line from Schedule AVD. V.1			100% of fair market value, up to any applicable statutory limit	2323.00(A)(4)(a)
Clothes Line from Schedule A/B: 11.1	\$50.00		\$50.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Elle II oli oonedale /v 2. T TT			100% of fair market value, up to any applicable statutory limit	2020:00(-1)(-1)(0)
Jewelry Line from Schedule A/B: 12.1	\$100.00		\$100.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
Ellie Holli Goriedale /VE. 1211			100% of fair market value, up to any applicable statutory limit	2020.00(/1)(4)(8)
Security Depsit to Landlord Line from Schedule A/B: 22.1	\$575.00		\$575.00	Ohio Rev. Code Ann. § 2329.66(A)(1)
Ellic Holli Gollodalo A.B. ZZTI			100% of fair market value, up to any applicable statutory limit	2020.00(//)(-/

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Best Case Bankruptcy

Je	otor 1 C	arol D I nomas	Case number (if known)	
3.	•	claiming a homestead exemption of more than \$170,350? to adjustment on 4/01/22 and every 3 years after that for cases filed on or	after the date of adjustment.)	
	■ No			
	☐ Yes	s. Did you acquire the property covered by the exemption within 1,215 day	s before you filed this case?	
		No		
		Yes		

Official Form 106C

Fill in this information	to identify you	r case:				
	ol D Thomas					
	Name	Middle Name La	st Name			
Debtor 2 (Spouse if, filing) First I	Name	Middle Name La:	st Name			
United States Bankruptc	y Court for the:	NORTHERN DISTRICT OF OHIO				
•	•				-	
Case number (if known)					□ Cho	ale if this is an
ii Kilowii)						ck if this is an nded filing
Official Form 106	SD					-
		Who Have Claims Se	cured	by Propert	У	12/15
		f two married people are filing together, b out, number the entries, and attach it to th				
. Do any creditors have cl	aims secured by	your property?				
☐ No. Check this bo	x and submit th	nis form to the court with your other sch	edules. You	u have nothing else t	o report on this form.	
Yes. Fill in all of the	he information l	pelow.				
Part 1: List All Secu	red Claims					
		more than one acquired claim, list the graditor	congrately	Column A	Column B	Column C
for each claim. If more than	one creditor has	nore than one secured claim, list the creditor a particular claim, list the other creditors in F cal order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this	Unsecured portion
2.1 Deja Vu LLC		Describe the property that secures the c	:laim:	\$241.00	claim \$2,950.00	If any \$0.0
Creditor's Name		2008 Dodge Calber 130000 mile	es	· · · · · · · · · · · · · · · · · · ·	. ,	<u> </u>
dba Universal N 320 Park Avenu Mansfield, OH 4	e East	As of the date you file, the claim is: Checapply. Contingent	k all that			
Number, Street, City, Sta	te & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt? Che	eck one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		An agreement you made (such as morto	gage or secu	red		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2 o	nly	Statutory lien (such as tax lien, mechan	ic's lien)			
At least one of the debto		☐ Judgment lien from a lawsuit				
☐ Check if this claim rela community debt	ites to a	Other (including a right to offset)				
Date debt was incurred _		Last 4 digits of account number				
				-		
-		olumn A on this page. Write that number I	nere:		11.00	
If this is the last was: f	your rorm, add	the dollar value totals from all pages.		\$24	11.00	
If this is the last page of Write that number here:				<u> </u>		

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 1

					•	
Fill in this info	ormation to identify your ca	se:			1	
Debtor 1	Carol D Thomas					
Dahtar 0	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO			
	-					
Case number					□ Chec	ck if this is an
,					_	nded filing
O#:a:a! =a	же 400Г/Г					
	rm 106E/F	a Haya Unaasi	red Claims			12/15
	E/F: Creditors Wh			t 2 fan anaditana with NO	NDDIODITY eleime	
left. Attach the C name and case r Part 1: List	ditors Who Have Claims Secure continuation Page to this page. number (if known). All of Your PRIORITY Unse	If you have no information				
	ditors have priority unsecured o	claims against you?				
□ No. Go to	o Part 2.					
Yes.	our priority unsecured claims.			· Pad Pa		1 1 2 2 4 1
possible, list Part 1. If mo	t type of claim it is. If a claim has I the claims in alphabetical order a re than one creditor holds a partic anation of each type of claim, see	according to the creditor's no cular claim, list the other cre	ame. If you have more the editors in Part 3.	an two priority unsecured o		
2.1 Mans	field Municipal Court	Last 4 digits of	account number	\$633.00	_	
Priority	Creditor's Name					
	Diamond Street field, OH 44902	When was the	debt incurred?		_	
	r Street City State Zip Code	As of the date	you file, the claim is: Ch	eck all that apply		
Who incu	red the debt? Check one.	☐ Contingent				
Debtor	1 only	☐ Unliquidated	l			
☐ Debtor	2 only	☐ Disputed				
☐ Debtor	1 and Debtor 2 only		ITY unsecured claim:			
☐ At least	t one of the debtors and another	☐ Domestic su	pport obligations			
☐ Check	if this claim is for a community	y debt Taxes and c	ertain other debts you ow	e the government		
Is the clair	m subject to offset?	☐ Claims for d	eath or personal injury wh	ile you were intoxicated		
■ No		☐ Other. Speci	ify			
☐ Yes						_
Part 2: List	All of Your NONPRIORITY	Unsecured Claims				
3. Do any cred	ditors have nonpriority unsecur	ed claims against you?				
☐ No. You	have nothing to report in this part	. Submit this form to the co	urt with your other schedu	iles.		
Yes.						
4. List all of your unsecured of	our nonpriority unsecured clair laim, list the creditor separately fe editor holds a particular claim, list	or each claim. For each clai	m listed, identify what type	e of claim it is. Do not list c	laims already include	ed in Part 1. If more

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 19

Debtor 1 Carol D Thomas		Case number (if known)				
4.1	Aaron's Inc. Nonpriority Creditor's Name	Last 4 digits of account number	\$1,000.00			
	892 N. Lexington - Springmill Rd Mansfield, OH 44906	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	Contingent				
	Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify Lease				
4.2	Acceptance Now Insurance Nonpriority Creditor's Name	Last 4 digits of account number	\$500.00			
	5501 Headquarters Drive Plano, TX 75024	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify Insurance				
4.3	Balliett, Richard	Last 4 digits of account number	\$0.00			
	Nonpriority Creditor's Name 782 Lexington Ave. Mansfield, OH 44907	When was the debt incurred? 2001				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	\square Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify eviction				

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 19

Debtor 1 Carol D Thomas		Case number (if known)				
4.4	Bayer Jerger & Underwood Nonpriority Creditor's Name 362 Lexington Ave Mansfield, OH 44907	Last 4 digits of account number When was the debt incurred?	\$400.00			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	\square Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Attorney				
4.5	Buckeye Carpet Nonpriority Creditor's Name	Last 4 digits of account number	\$150.00			
	803 Joselyn Ave Mansfield, OH 44904	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	□ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify General Services				
4.6	Nonpriority Creditor's Name	Last 4 digits of account number	\$75.00			
	3833 S. High Street Columbus, OH 43207	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	□ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify other				

Schedule E/F: Creditors Who Have Unsecured Claims

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Capital One Card Services Nonpriority Creditor's Name	Last 4 digits of account number	\$1,000.00
PO box 9600 Carol Stream, IL 60128	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify	
Cashland	Last 4 digits of account number	\$1,000.00
Nonpriority Creditor's Name 371 Ashland Road	When was the debt incurred?	
Mansfield, OH 44905 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Payday Loan	
Cbe Group	Last 4 digits of account number 3531	\$441.00
Nonpriority Creditor's Name 131 Tower Park Drive Suite 100 Waterloo, IA 50704	When was the debt incurred? Opened 10/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
\square Check if this claim is for a community	Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ NO		
☐ Yes	Collection Attorney Charter Other. Specify Communications	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debt	or 1 Carol D Thomas	Case number (if known)	
4.1 0	Chase	Last 4 digits of account number	\$2,000.00
U	Nonpriority Creditor's Name PO Box 6294	When was the debt incurred?	4=,000.00
	Carol Stream, IL 60197 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card purchases	
4.1 1	Check Into Cash	Last 4 digits of account number	\$600.00
	Nonpriority Creditor's Name 703 Harding Way E Galion, OH 44833	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	Check-N-Go	Last 4 digits of account number	\$1,000.00
2	Nonpriority Creditor's Name		41,000.00
	991 Ashland Rd Mansfield, OH 44905	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Payday Loan	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 19

1 Carol D Thomas	Case number (if known)	
Columbia Gas (p)	Last 4 digits of account number 0009	\$1,782.0
Nonpriority Creditor's Name 290 W. Nationwide Blvd. 5th Fl. Bankruptcy Department	When was the debt incurred?	
Columbus, OH 43215-4157	As a fit the state was filler the state in the Olivia transfer	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Utilities	
Columbia Gas (p)	Last 4 digits of account number	\$10,260.4
Nonpriority Creditor's Name 290 W. Nationwide Blvd. 5th Fl. Bankruptcy Department	When was the debt incurred?	
Columbus, OH 43215-4157 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Utilities	
Community Action Commission	Last 4 digits of account number	\$1,278.0
Nonpriority Creditor's Name PIPP Program 597 Park Avenue	When was the debt incurred?	
Mansfield, OH 44902 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Пол	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other, Specify Utilities	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debto	Carol D Thomas	Case number (if known)	
4.1	Community Action Commission	Last 4 digits of account number	\$1,782.00
	Nonpriority Creditor's Name PIPP Program 297 Park Avenue Mansfield, OH 44902	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Utilities	
4.1	Directions Credit Union Nonpriority Creditor's Name	Last 4 digits of account number 7399	\$700.00
	340 W. Main St. Mansfield, OH 44904	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.1	Dish Network Nonpriority Creditor's Name	Last 4 digits of account number	\$400.00
	PO Box 94063 Palatine, IL 60094	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Utilities	

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Carol D Thomas	Case number (if known)	
Dish Network	Look 4 divite of consumt number	\$400.0
Nonpriority Creditor's Name PO Box 94063	Last 4 digits of account number When was the debt incurred?	ψ400.0
Palatine, IL 60094	- Acceptance of the standard Community of th	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Enhance Recovery Corp	Last 4 digits of account number 7492	\$767.0
Nonpriority Creditor's Name		
Po Box 57547 Jacksonville, FL 32241	When was the debt incurred? Opened 11/18	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Communications	
Fingerhut	Last 4 digits of account number	\$800.0
Nonpriority Creditor's Name PO Box 166	When was the debt incurred?	
Newark, NJ 07101		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
	Obligations arising out of a separation agreement or divorce that you did not	
debt Is the claim subject to offset?	report as priority claims	
ls the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	

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01		5020	A
Ginnys/Swiss Colony Inc Nonpriority Creditor's Name	Last 4 digits of account number	<u>5630</u>	\$717.0
1112 7th Ave		Opened 06/16 Last Active	
Monroe, WI 53566	When was the debt incurred?	6/03/16	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	 Obligations arising out of a sepa report as priority claims 	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other. Specify Charge Acc	count	
Gordon Food Service	Last 4 digits of account number		\$800.0
Nonpriority Creditor's Name	When was the debt incurred?		
p o box 1787 Grand Rapids, MI 49501-1787	when was the debt incurred?		
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other. Specify Credit card	purchases	
			4=00
Hobby Lobby Nonpriority Creditor's Name	Last 4 digits of account number		\$500.0
909 N. Lexington-Springmill RD Mansfield, OH 44906	When was the debt incurred?		
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	on plane, and other similar dobts	
■ NO	· · · · · · · · · · · · · · · · · · ·	purchases	

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Carol D Thomas	Case number (if known)	
Huntington National Bank	Last 4 digits of account number	\$1,000.0
Nonpriority Creditor's Name PO Box 182387	When was the debt incurred?	\$1,000
Columbus, OH 43218		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit card purchases	
James A. Fischer	Last 4 digits of account number	\$600.
Nonpriority Creditor's Name		*****
2372 Lakecrest Dr.	When was the debt incurred?	
Mansfield, OH 44903		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
•	□ Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes		
□ Yes	■ Other. Specify Rent	
JoAnn Fabrics	Last 4 digits of account number	\$500.
Nonpriority Creditor's Name 594 N. Lexington Springmill Rd Mansfield, OH 44906-3823	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit card purchases	

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1 Carol D Thomas	Case number (if known)	
JPMorgan Chase Bank, NA	Last 4 digits of account number	\$1,000.00
Nonpriority Creditor's Name P O Box 182051	When was the debt incurred?	. ,
Columbus, OH 43218-2051 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card purchases	
Kroger Nonpriority Creditor's Name	Last 4 digits of account number	\$2,000.00
Dept 86130 Oaks, PA 19456	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify nsf	
L.O.W. Enterprises LLC	Last 4 digits of account number	\$400.00
Nonpriority Creditor's Name P O Box 1097	When was the debt incurred?	
Mansfield, OH 44903 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	

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Mechanics Bank Cardmember Serv	Last 4 digits of account number	\$2,000.00
Nonpriority Creditor's Name PO Box 790408 Saint Louis, MO 63179	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit card purchases	
MedCentral Hospitals/ OhioHealth	Last 4 digits of account number	\$4,000.00
Nonpriority Creditor's Name PO BOx 713008 Cincinnati, OH 45271-3008	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	Student loans	
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Ohio Edison	Last 4 digits of account number 6786	\$1,278.00
Nonpriority Creditor's Name PO Box 3687	When was the debt incurred?	
Akron, OH 44308-1890 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify Utilities	

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Debto	Carol D Thomas	Case number (if known)	
4.3	Ohio Edison	Last 4 digits of account number	\$13,000.00
	Nonpriority Creditor's Name PO Box 3687	When was the debt incurred?	
	Akron, OH 44308-1890 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Utilities	
4.3	Ohio Eye Associates	Last 4 digits of account number	\$200.00
<u>J</u>	Nonpriority Creditor's Name 466 S Trimble Road	When was the debt incurred?	i
	Mansfield, OH 44906 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The of the date year me, the staim is: officer all that appry	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Services	
4.3	Plaza Services, LLC	Last 4 digits of account number 8594	\$487.00
	Nonpriority Creditor's Name 110 Hammond Drive Suite 110 Atlanta, GA 30328	When was the debt incurred? Opened 6/01/17	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify 12 Cashland	

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Quaina Thomas	Last 4 digits of account number	\$1,000.00
Nonpriority Creditor's Name 139 Blanch St. Mansfield, OH 44903	When was the debt incurred?	
Number Street City State Zip Code Nho incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Personal Loan	
Reip's Appliance LLC Nonpriority Creditor's Name	Last 4 digits of account number	\$100.00
605 Springmill Street Mansfield, OH 44903	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify General Services/Appliance	
Rent-A-Center	Last 4 digits of account number	\$1,000.00
Nonpriority Creditor's Name 532 N. Lex-Springmill Rd. Mansfield, OH 44906	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify General Services rental fees	

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Carol D Thomas	Case number (if known)	
Richland County Auditor	Last 4 digits of account number	\$3.000.0
Nonpriority Creditor's Name 50 Park Avenue East	When was the debt incurred?	ψο,σσσ.σ
Mansfield, OH 44902		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Property tax on 526 Dewey Ave.	
Spectrum / Time Warner Cable	Last 4 digits of account number	\$0.0
Nonpriority Creditor's Name		
Attn: Recovery Support 3347 Platt Springs Road	When was the debt incurred?	
West Columbia, SC 29170 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	•	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Stanley Steemer Carpet Cleaner	Last 4 digits of account number	\$130.0
Nonpriority Creditor's Name 1231 Park Avenue East	When was the debt incurred?	
Mansfield, OH 44905 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
— 100		

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E

Carol D Thomas		Case number (if known)		
State Farm Insurance Companies	Last 4 digits of account number	3128	\$14	
Nonpriority Creditor's Name PO Box 3020	When was the debt incurred?			
Number Street City State Zip Code As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	As of the date you me, the claim i			
■ Debtor 1 only	☐ Contingent			
	Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only Disputed			
•				
☐ At least one of the debtors and another				
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
☐ Yes	Other. Specify			
Time Warner Cable	Lock A divide of account number		\$600	
Nonpriority Creditor's Name	Last 4 digits of account number		Ψοσο	
PO Box 2553	When was the debt incurred?			
Columbus, OH 43216-2553		Sec. Of the Huller of the		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
Debtor 1 only	По :: .			
_	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured			
At least one of the debtors and another	Student loans	a Claim.		
☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not		
ls the claim subject to offset?	report as priority claims	iration agreement of divorce that you did not		
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
☐ Yes ☐ Other. Specify				
United Acceptance, Inc.	Last 4 digits of account number	0601	\$0	
Nonpriority Creditor's Name				
2400 Lake Park Dr Smyrna, GA 30080	When was the debt incurred?	Opened 08/11 Last Active 2/14/18		
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
No Debts to pension or profit-sharing plans, and other similar debts				
□ Yes	Other. Specify Automobile			

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Debtor 1 Carol D Thomas		Case number (if known)		
4.4	Vester L. Morrison, Inmate A704465	Last 4 digits of account number	\$5,000.00	
	Nonpriority Creditor's Name c/o Marion Correctional Institution PO Box 57 Marion, OH 43302	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Personal Loan		
4.4	Walmart/Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$1,000.00	
	PO Box 530927 Atlanta, GA 30353	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
4.4	Woodforest National Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$3,000.00	
	1330 Lake Robbins Drive Spring, TX 77380	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 17 of 19

Best Case Bankruptcy

Name and Address **United Acceptance, Inc.**

Official Form 106 F/F

Line <u>4.45</u> of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims

Schedule E/F: Creditors Who Have Unsecured Claims

On which entry in Part 1 or Part 2 did you list the original creditor?

Page 18 of 19

Debtor 1 Carol D Thomas		Case number (if known)			
Attn: Bankruptcy 2400 Lake Park Dr Se, Ste 100 Smyrna, GA 30080		■ Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?				
US Bank	Line 4.24 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
U.S. Bankcorp Center 800 Nicollet Mall Minneapolis, MN 55402		■ Part 2: Creditors with Nonpriority Unsecured Claims			
minicapone, mit co-roz	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?			
Weltman, Weinberg & Reis Co., LPA	Line 4.17 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
323 W. Lakeside, Ste. 200 Cleveland, OH 44113-1009		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Cievelaliu, Ori 44 i 13-1009	Last 4 digits of account number				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 633.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 633.00
	C.f	Chadanthana	C4	Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 69,722.33
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 69,722.33

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 19 of 19

Fill in this infor	mation to identify your	case:		
Debtor 1	Carol D Thomas			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Value Housing LLC
6834 Wheatcraft Rd.
Butler, OH 44822

State what the contract or lease is for
Residential lease agreement

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

	Carel D Thomas				
Debtor 1	Carol D Thomas First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, f		Middle Name	Last Name		
	tates Bankruptcy Court for the:	NORTHERN DISTRICT			
Office Of	tates bankruptey doubt for the.	- HORMERIN BIOTRIO	1 01 01110		
Case nur (if known)	mber				eck if this is an ended filing
Officia	al Form 106H				
	dule H: Your Cod	lebtors			12/15
					,
our nam	and number the entries in the ne and case number (if known o you have any codebtors? (If). Answer every question	1.	o this page. On the top of any Addition as a codebtor.	onal Pages, write
	,		·		
■ No	-				
□ 16	es				
	ithin the last 8 years, have yo		roperty state or territor	v? (Community property states and teri	
AllZC	ona, Gamorna, Idano, Eddisiana	i, Nevada, New Mexico, Pu	uerto Rico, Texas, Wash		ritories include
	o. Go to line 3.	a, Nevada, New Mexico, Pt			ritories include
■ No			uerto Rico, Texas, Wash		ritories include
Ye 3. In Co in lin Forn	o. Go to line 3. es. Did your spouse, former spo olumn 1, list all of your codeb ne 2 again as a codebtor only n 106D), Schedule E/F (Officia Column 2.	ouse, or legal equivalent live tors. Do not include your if that person is a guarar	uerto Rico, Texas, Wash e with you at the time? r spouse as a codebtor	ngton, and Wisconsin.) if your spouse is filing with you. Lissure you have listed the creditor on \$66). Use Schedule D, Schedule E/F,	t the person shown Schedule D (Official or Schedule G to fill
Ye 3. In Co in lin Forn	o. Go to line 3. es. Did your spouse, former spo olumn 1, list all of your codeb ne 2 again as a codebtor only n 106D), Schedule E/F (Officia	ouse, or legal equivalent live tors. Do not include your if that person is a guarar Il Form 106E/F), or Sched	uerto Rico, Texas, Wash e with you at the time? r spouse as a codebtor	ngton, and Wisconsin.) if your spouse is filing with you. Lissure you have listed the creditor on \$	t the person shown Schedule D (Official or Schedule G to fill
Ye 3. In Co in lin Forn	o. Go to line 3. es. Did your spouse, former spoolumn 1, list all of your codebone 2 again as a codebtor only in 106D), Schedule E/F (Official Column 2.	ouse, or legal equivalent live tors. Do not include your if that person is a guarar Il Form 106E/F), or Sched	uerto Rico, Texas, Wash e with you at the time? r spouse as a codebtor	if your spouse is filing with you. List sure you have listed the creditor on \$66). Use Schedule D, Schedule E/F, Column 2: The creditor to whom	t the person shown Schedule D (Official or Schedule G to fill
3. In Coin lin Form out 0	o. Go to line 3. es. Did your spouse, former spoolumn 1, list all of your codebone 2 again as a codebtor only in 106D), Schedule E/F (Official Column 2.	ouse, or legal equivalent live tors. Do not include your if that person is a guarar Il Form 106E/F), or Sched	uerto Rico, Texas, Wash e with you at the time? r spouse as a codebtor	if your spouse is filing with you. List sure you have listed the creditor on \$6G). Use Schedule D, Schedule E/F, Column 2: The creditor to whom Check all schedules that apply:	t the person shown Schedule D (Official or Schedule G to fill
3. In Coin lin Form out 0	o. Go to line 3. es. Did your spouse, former spoolumn 1, list all of your codebone 2 again as a codebtor only in 106D), Schedule E/F (Official Column 2. Column 1: Your codebtor Name, Number, Street, City, State and 2.	ouse, or legal equivalent live tors. Do not include your if that person is a guarar Il Form 106E/F), or Sched	uerto Rico, Texas, Wash e with you at the time? r spouse as a codebtor	if your spouse is filing with you. List sure you have listed the creditor on \$6G). Use Schedule D, Schedule E/F, Column 2: The creditor to whom Check all schedules that apply: Schedule D, line	t the person shown Schedule D (Official or Schedule G to fill
3. In Coin lin Form out 0	o. Go to line 3. es. Did your spouse, former spoolumn 1, list all of your codebone 2 again as a codebtor only in 106D), Schedule E/F (Official Column 2. Column 1: Your codebtor Name, Number, Street, City, State and 2.	ouse, or legal equivalent live tors. Do not include your if that person is a guarar Il Form 106E/F), or Sched	uerto Rico, Texas, Wash e with you at the time? r spouse as a codebtor	if your spouse is filing with you. Listsure you have listed the creditor on \$6G). Use Schedule D, Schedule E/F, Column 2: The creditor to whom Check all schedules that apply: Schedule D, line Schedule E/F, line	t the person shown Schedule D (Official or Schedule G to fill
3. In Co in lin Form out (o. Go to line 3. es. Did your spouse, former spoul of the spouse of the	ouse, or legal equivalent livers. Do not include your if that person is a guarar al Form 106E/F), or Sched	uerto Rico, Texas, Wash e with you at the time? r spouse as a codebtor ntor or cosigner. Make dule G (Official Form 10	if your spouse is filing with you. List sure you have listed the creditor on \$66). Use Schedule D, Schedule E/F, Column 2: The creditor to whom Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line	t the person shown Schedule D (Official or Schedule G to fill
3. In Coin lin Form out 0	o. Go to line 3. es. Did your spouse, former spouse	ouse, or legal equivalent livers. Do not include your if that person is a guarar al Form 106E/F), or Sched	uerto Rico, Texas, Wash e with you at the time? r spouse as a codebtor ntor or cosigner. Make dule G (Official Form 10	if your spouse is filing with you. List sure you have listed the creditor on \$66). Use Schedule D, Schedule E/F, Column 2: The creditor to whom Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line	t the person shown Schedule D (Official or Schedule G to fill
3. In Co in lin Form out (o. Go to line 3. es. Did your spouse, former spoul of the spouse of the	ouse, or legal equivalent livers. Do not include your if that person is a guarar al Form 106E/F), or Sched	uerto Rico, Texas, Wash e with you at the time? r spouse as a codebtor ntor or cosigner. Make dule G (Official Form 10	if your spouse is filing with you. List sure you have listed the creditor on \$6G). Use Schedule D, Schedule E/F, Column 2: The creditor to whom Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line	t the person shown Schedule D (Official or Schedule G to fill
3. In Co in lin Form out (o. Go to line 3. es. Did your spouse, former spouse	ouse, or legal equivalent livers. Do not include your if that person is a guarar al Form 106E/F), or Sched	uerto Rico, Texas, Wash e with you at the time? r spouse as a codebtor ntor or cosigner. Make dule G (Official Form 10	if your spouse is filing with you. List sure you have listed the creditor on \$66). Use Schedule D, Schedule E/F, Column 2: The creditor to whom Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line	t the person shown Schedule D (Official or Schedule G to fill

	in this information to identify your								
Del	otor 1 Carol D The	omas			_				
	btor 2				_				
Uni	ited States Bankruptcy Court for th	e: NORTHERN DISTRIC	CT OF OHIO		_				
(If kr	se number nown)		-			Check if this is An ameno A supplen 13 income	led filing nent showir	ng postpetition ollowing date:	
0	fficial Form 106l					MM / DD/	YYYY		
S	chedule I: Your Inc	ome							12/15
spo atta	plying correct information. If you use. If you are separated and yo ch a separate sheet to this form Tell: Describe Employment information.	ur spouse is not filing w . On the top of any additi	ith you, do not inclu	ıde infori	matio	on about your sp I case number (i	ouse. If m	ore space is	needed,
			☐ Employed			□ Emp		iiiig spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Not employed				employed		
	Include part-time, seasonal, or self-employed work.	Occupation Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Pai	rt 2: Give Details About Mo	onthly Income							
	mate monthly income as of the cuse unless you are separated.		you have nothing to r	eport for	any	ine, write \$0 in th	e space. In	clude your noi	n-filing
	ou or your non-filing spouse have n e space, attach a separate sheet to		ombine the informatio	on for all e	emplo	oyers for that pers	on on the li	ines below. If	you need
						For Debtor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$	0.00	\$	N/A	
3.	Estimate and list monthly over	rtime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add I	ine 2 + line 3.		4.	\$	0.00	\$	N/A	

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

e.			
	12.	\$	916.00
		Comb	ined nly income

0.00

11. +\$

13. Do you expect an increase or decrease within the year after you file this form?

other friends or relatives.

Specify:

No.	
Yes. Explain:	

Official Form 106I Schedule I: Your Income page 2

Filli	n this informa	tion to identify yo	our case:			l		
Debt		Carol D Tho				Chec	ck if this is:	
							An amended filing	
Debt (Spo	or 2 ouse, if filing)							wing postpetition chapter the following date:
Unite	ed States Bankr	uptcy Court for the	: NORTH	ERN DISTRICT OF OHIC)	-	MM / DD / YYYY	
	e number nown)							
Of	ficial Fo	rm 106J				•		
Sc	chedule	J: Your	Exper	ises				12/15
info	rmation. If m	and accurate as ore space is ne n). Answer eve	eded, atta	If two married people ar ch another sheet to this n.	e filing together, be form. On the top of	oth are equ f any addition	ally responsible fo onal pages, write y	or supplying correct your name and case
Part		ibe Your House	ehold					
1.	Is this a join							
	■ No. Go to		in a sonar	ate household?				
	□ res. Doe		iii a sepai	ate nousenoid:				
			st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Deb	tor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.			-			□ Yes □ No
								☐ Yes
								□ No
								☐ Yes
								□ No □ Yes
3.		enses include		No				— 100
	•	f people other t d your depende		Yes				
exp	mate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		n assistance an		government assistance i luded it on <i>Schedule I:</i> \			Your exp	enses
		•		_				
4.		r home owners ad any rent for th		ses for your residence. I r lot.	nclude first mortgage	e 4. \$	S	143.00
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a. \$	S	0.00
		rty, homeowner's				4b. \$		14.90
		maintenance, re owner's associat		ipkeep expenses		4c. \$ 4d. \$		0.00 0.00
5.				our residence, such as ho	me equity loans	5. \$		0.00

ebtor 1	Carol D Thomas	Case num	ber (if known)	
Util	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	197.00
6b.	Water, sewer, garbage collection	6b.	\$	96.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	50.00
6d.	Other. Specify:	6d.	\$	0.00
	d and housekeeping supplies	7.	\$	295.00
	Idcare and children's education costs	8.	\$	0.00
	thing, laundry, and dry cleaning	9.	\$	10.00
	sonal care products and services	10.	\$	
	dical and dental expenses	11.	\$	0.00
	•	11.	Φ	10.00
	nsportation. Include gas, maintenance, bus or train fare. not include car payments.	12.	\$	100.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	ritable contributions and religious donations	14.	\$	0.00
	Trance.	14.	Ψ	0.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	. Life insurance	15a.	\$	0.00
	. Health insurance	15b.	\$	0.00
	. Vehicle insurance	15b. 15c.	\$	0.00
	. Other insurance. Specify:	15d.	\$	
		13u.	Φ	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.	16.	¢	0.00
	cify:		\$	0.00
	allment or lease payments: . Car payments for Vehicle 1	17a.	¢	0.00
	. Car payments for Vehicle 2	17a. 17b.	\$	
	• •		·	0.00
	Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
	ir payments of alimony, maintenance, and support that you did not repor		\$	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 10)	61). 10.	\$	
	er payments you make to support others who do not live with you.	40	Φ	0.00
•	cify:	19.	Incomo	
	er real property expenses not included in lines 4 or 5 of this form or on S . Mortgages on other property	20a.		0.00
			· · · · · · · · · · · · · · · · · · ·	0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	. Homeowner's association or condominium dues	20e.	·	0.00
. Oth	er: Specify:	21.	+\$	0.00
Cal	culate your monthly expenses			
	. Add lines 4 through 21.		\$	045.00
	<u> </u>			915.90
	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J	-2	\$	
22c	. Add line 22a and 22b. The result is your monthly expenses.		\$	915.90
Cal	culate your monthly net income.			
	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	916.00
	Copy your monthly expenses from line 22c above.	23a. 23b.		
230	. Copy your monthly expenses nomine 220 above.	∠30.	-φ	915.90
230	. Subtract your monthly expenses from your monthly income.			
230	The result is your <i>monthly net income</i> .	23c.	\$	0.10
	The result is your monthly not income.	_50.		
l. Do	you expect an increase or decrease in your expenses within the year afte	r vou file this	form?	
For	example, do you expect to finish paying for your car loan within the year or do you expect			or decrease because of a
mod	ification to the terms of your mortgage?			
	No.			
	/es. Explain here:			

Debtor 1	Carol D Thomas				
Depior 1	First Name	Middle Name	Last Name		
Debtor 2					
Spouse if, filing)	First Name	Middle Name	Last Name		
Inited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
ase number _					
f known)				☐ Check if this is amended filing	
	ION ADOUT?	an ingividuai	Deptor's Sche	aules	12/14
two married pe ou must file thi btaining money	eople are filing togethe s form whenever you f	r, both are equally respoille bankruptcy schedules n connection with a bank			rty, or
two married pe ou must file thi btaining money ears, or both. 1	eople are filing togethe s form whenever you f y or property by fraud i	r, both are equally respoille bankruptcy schedules n connection with a bank	nsible for supplying correct in	nformation. ing a false statement, concealing prope	rty, or
two married pe ou must file thi otaining money ears, or both. 1	eople are filing togethe s form whenever you f y or property by fraud i 8 U.S.C. §§ 152, 1341,	r, both are equally respo ile bankruptcy schedules n connection with a banl 1519, and 3571.	nsible for supplying correct in	nformation. ing a false statement, concealing prope es up to \$250,000, or imprisonment for u	rty, or
two married pe ou must file thi otaining money ears, or both. 1	eople are filing togethe s form whenever you f y or property by fraud i 8 U.S.C. §§ 152, 1341,	r, both are equally respo ile bankruptcy schedules n connection with a banl 1519, and 3571.	nsible for supplying correct in or amended schedules. Mak cruptcy case can result in fine	nformation. ing a false statement, concealing prope es up to \$250,000, or imprisonment for u	
two married per ou must file thi btaining money ears, or both. 1 Sign Did you pa	eople are filing togethe s form whenever you f y or property by fraud i 8 U.S.C. §§ 152, 1341,	r, both are equally respo ile bankruptcy schedules n connection with a banl 1519, and 3571.	nsible for supplying correct in or amended schedules. Mak cruptcy case can result in fine	nformation. ing a false statement, concealing prope es up to \$250,000, or imprisonment for u	rty, or up to 20
two married per purpose must file this pars, or both. 1 Signature Did you pa No Yes. N	eople are filing togethers form whenever you for the property by fraud in the second sec	er, both are equally respo ile bankruptcy schedules n connection with a band 1519, and 3571.	nsible for supplying correct in or amended schedules. Mak cruptcy case can result in fine	nformation. ing a false statement, concealing properties up to \$250,000, or imprisonment for understanding properties. uptcy forms? Attach Bankruptcy Petition Preparer's Declaration, and Signature (Official Formation)	rty, or up to 20
bu must file thiotaining moneyears, or both. 1 Sign Did you pa No Yes. N Under pena that they are	eople are filing togethers form whenever you for property by fraud in 8 U.S.C. §§ 152, 1341, and Below Yor agree to pay some warms of person	er, both are equally respo ile bankruptcy schedules n connection with a band 1519, and 3571.	nsible for supplying correct in or amended schedules. Make truptcy case can result in fine the new to help you fill out bankround and schedules filed with X	nformation. ling a false statement, concealing properties up to \$250,000, or imprisonment for understanding properties. uptcy forms? Attach Bankruptcy Petition Preparer's Declaration, and Signature (Official Foundation)	rty, or up to 20
bu must file this training money ears, or both. 1 Did you pa No Yes. N Under pena that they are X /s/ Carol I	eople are filing togethers form whenever you for property by fraud in 8 U.S.C. §§ 152, 1341, and Below In a gree to pay some some some some some of person Ity of perjury, I declare true and correct.	er, both are equally respo ile bankruptcy schedules n connection with a band 1519, and 3571.	nsible for supplying correct in or amended schedules. Mak cruptcy case can result in fine ney to help you fill out bankro	nformation. ling a false statement, concealing properties up to \$250,000, or imprisonment for understanding properties. uptcy forms? Attach Bankruptcy Petition Preparer's Declaration, and Signature (Official Foundation)	rty, or up to 20

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fil	l in th	nis information to identify yo	our case:			
De	btor 1	Carol D Thoma	as			
_		First Name	Middle Name	Last Name		
1	btor 2 ouse if,		Middle Name	Last Name		
Un	ited S	States Bankruptcy Court for th	e: NORTHERN DISTRIC	T OF OHIO		
Ca	ise nii	ımber				
1	nown)		_			Check if this is an amended filing
St	ate	mplete and accurate as pos	ssible. If two married people	riduals Filing for I	e equally responsible for s	
		ion. If more space is neede (if known). Answer every qu		to this form. On the top of a	ny additional pages, write y	our name and case
Pa	rt 1:	Give Details About Your	Marital Status and Where Y	ou Lived Before		
1.	Wha	at is your current marital sta	atus?			
		Married				
		Not married				
2.	Dur	ing the last 3 years, have yo	ou lived anywhere other tha	n where you live now?		
		Na				
		No Yes. List all of the places yo	u lived in the last 3 years. Do	not include where you live no	ow.	
	De	btor 1 Prior Address:	Dates Debtor lived there	1 Debtor 2 Prior A	Address:	Dates Debtor 2 lived there
3. stat				legal equivalent in a commu Nevada, New Mexico, Puerto		
		No				
			Schedule H: Your Codebtors	(Official Form 106H).		
Pa	rt 2	Explain the Sources of Y	our Income			
4.	Fill i	in the total amount of income	you received from all jobs an	ting a business during this of d all businesses, including pa- sive together, list it only once u	rt-time activities.	lendar years?
		No				
		Yes. Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)

Official Form 107

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Best Case Bankruptcy

5.								s calendar years?		ort: Social Se	curity, unemployment,
	and other	public	benef	it payments;	pensions; r	ental income; inter	rest; divid	ends; money collec		royalties; and	I gambling and lottery
	List each	ource	and tl	he gross inco	me from ea	ach source separa	tely. Do n	ot include income	that you listed in lin	e 4.	
	□ No										
	_	Fill in t	the de	tails.							
					Debtor 1				Debtor 2		
						of income pelow.	each	s income from source e deductions and ions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
	om January e date you f			nt year until kruptcy:	SS & Foo			\$1,832.00			
	r last calen inuary 1 to			31, 2019)	SS & foo	od assistance		\$10,848.00			
	r the calend inuary 1 to				SS & foo	od assistance		\$10,464.00			
D-	A	01-	·		Mada Bata	V Elle I (D I				
Ра	rt 3: List	Certa	in Pa	yments You	Made Beto	ore You Filed for	Bankrup	tcy			
6.	Are either No.					imarily consume		ts Consumor dob	te are defined in 11	1186 8 101	(8) as "incurred by an
	— 110.					amily, or househo			is are defined in Tr	0.0.0. § 101	(b) as incurred by an
		Durir	ng the	90 days befo	re you filed	for bankruptcy, di	id you pay	any creditor a tota	al of \$6,825* or mo	re?	
				Go to line 7							
		* \$11		paid that cre not include	editor. Do n payments t	ot include paymer o an attorney for the	nts for dor his bankr	mestic support obliquetcy case.		ild support ar	e total amount you nd alimony. Also, do
	.								TOT AILET THE GATE O	r aujustinent.	
	■ Yes.					e primarily consu for bankruptcy, di			al of \$600 or more?		
				Go to line 7							
		⊔ ,	Yes	List below e include pay attorney for	ments for d	omestic support o	id a total obligations	of \$600 or more an s, such as child sup	d the total amount port and alimony.	you paid that Also, do not ir	creditor. Do not nclude payments to an
	Creditor'	s Nam	ne and	I Address		Dates of payme	ent	Total amount paid	Amount you still owe	Was this p	ayment for
7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone will Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligating alimony.						erships of which yo g securities; and ar	u are a gener ny managing a	al partner; corporations agent, including one for			
	■ No										
	☐ Yes.	List all	l paym	ents to an in	sider.						
	Insider's	Name	and A	Address		Dates of payme	ent	Total amount	Amount you	Reason for	this payment
								paid	still owe		

Case number (if known)

Official Form 107

Debtor 1 Carol D Thomas

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Det	otor 1 Carol D Thomas		Case num	iber (if known)		
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer any pr	operty on a	count of a de	bt that benefited an
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount Am	ount you still owe	Reason for to	this payment tor's name
Par	t 4: Identify Legal Actions, Repossessio	ons, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.					
	□ No■ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
	MPD vs. Thomas AKA. Carolyn Morrison, Carol D Carolyn Morrison, Carol D. 2019CRB06436	Misdemeanor/ Mansfield Police Dept	Mansfield Municipal 30 N. Diamond Stree Mansfield, OH 44902	et	☐ Pending ☐ On appea ☐ Conclude	
	■ No. Go to line 11. □ Yes. Fill in the information below. Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened	d			property
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed ■ No □ Yes. Fill in the details.		luding a bank or financia	l institution	, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date a	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		erty in the possession of	an assigne	e for the bene	fit of creditors, a
	■ No □ Yes					
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankru	ptcy, did you give any gift	s with a total value of mo	re than \$60	0 per person?	
	■ No☐ Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the gi	you gave fts	Value
	Person to Whom You Gave the Gift and Address:					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Del	btor 1 Carol D Thomas	C:	ase number (if known)	
14.	Within 2 years before you filed for bankrupte No	cy, did you give any gifts or contributions	s with a total value of more than	\$600 to any charity?
	☐ Yes. Fill in the details for each gift or contr	ibution.		
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Par	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptcy or gambling?	ou lose anything because of thef	t, fire, other disaster	
	■ No			
	Yes. Fill in the details.			
	how the loss occurred Inc	scribe any insurance coverage for the local desired the amount that insurance has paid. Lical urance claims on line 33 of Schedule A/B: F	st pending loss	Value of property lost
Par	rt 7: List Certain Payments or Transfers			
16.	Within 1 year before you filed for bankruptcy consulted about seeking bankruptcy or prepared include any attorneys, bankruptcy petition prepared in the work of the prepared in the details.	paring a bankruptcy petition? arers, or credit counseling agencies for serv	rices required in your bankruptcy.	
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any prope transferred	or transfer was made	Amount of payment
	Thompson & Hockenberry Co., LPA 371 Lexington Avenue Mansfield, OH 44907 rebecca@attyTH.com	Attorney Fees		\$300.00
	CC Advising, Inc. 703 Washington Ave., Ste. 200 Bay City, MI 48708	Credit counseling	10/2019	\$9.76
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you	rs or to make payments to your creditors		rty to anyone who
	No			
	☐ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any prope transferred	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrupte transferred in the ordinary course of your but Include both outright transfers and transfers mainclude gifts and transfers that you have alread No	usiness or financial affairs? ade as security (such as the granting of a se		
	Yes. Fill in the details.			
	Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
	Person's relationship to you		_	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Carol D Thomas Case number (if known)

19.	 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. 					
	Name of trust	Description and	value of the prop	perty trans	ferred	Date Transfer was made
Par	List of Certain Financial Accounts, Inst	ruments, Safe Depos	it Boxes, and Sto	orage Unit	S	
	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ ■ No □ Yes. Fill in the details.	other financial accou	nts; certificates	of deposit		
		Last 4 digits of account number	Type of account instrument	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities cash, or other valuables? No				itory for securities,		
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe the contents		Do you still have it?
22.	Have you stored property in a storage unit or	place other than you	r home within 1	year befor	e you filed for bankrupt	cy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe 1	the contents	Do you still have it?
Par	9: Identify Property You Hold or Control for	or Someone Else				
23.	Do you hold or control any property that som for someone.	neone else owns? Incl	ude any propert	y you borr	owed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value
Par	10: Give Details About Environmental Info	rmation				
For	he purpose of Part 10, the following definition	ns apply:				
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.					
	Site means any location, facility, or property to own, operate, or utilize it, including dispos	_	environmental la	aw, whethe	er you now own, operat	e, or utilize it or used
	Hazardous material means anything an envir hazardous material, pollutant, contaminant, o		as a hazardous	waste, haz	zardous substance, toxi	c substance,
Rep	Report all notices, releases, and proceedings that you know about, regardless of when they occurred.					

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Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Best Case Bankruptcy

Debtor 1 Carol D Thomas Case number (if known)

24.	Has	any governmental unit notified you tha	nt you may be liable or potentially liable	under or in violation of an	environmental law?				
		No							
		Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if y know it	you Date of notice				
25.	Hav	re you notified any governmental unit of	f any release of hazardous material?						
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if y know it	you Date of notice				
26.	Hav	ve you been a party in any judicial or ad	ministrative proceeding under any envi	ronmental law? Include set	ttlements and orders.				
		No Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Pai	t 11:	Give Details About Your Business or	Connections to Any Business						
27.	Wit	hin 4 years before you filed for bankrup	tcy, did you own a business or have an	y of the following connecti	ons to any business?				
		☐ A sole proprietor or self-employed	in a trade, profession, or other activity,	either full-time or part-time	· •				
		☐ A member of a limited liability com	pany (LLC) or limited liability partnershi	ip (LLP)					
		 □ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership 							
		☐ An officer, director, or managing executive of a corporation							
	_	☐ An owner of at least 5% of the voting or equity securities of a corporation							
		No. None of the above applies. Go to Part 12.							
		Yes. Check all that apply above and fil	I in the details below for each business	S.					
	Ad	siness Name dress mber, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper		Employer Identification number Do not include Social Security number or ITIN.				
				Dates business existed					
28.		hin 2 years before you filed for bankrup itutions, creditors, or other parties.	tcy, did you give a financial statement t	to anyone about your busin	ness? Include all financial				
		No Yes. Fill in the details below.							
	Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued						

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1	Carol D Thomas	Case number (if known)
Part 12:	Sign Below	
are true with a ba	and correct. I understand that maki	Financial Affairs and any attachments, and I declare under penalty of perjury that the answers a false statement, concealing property, or obtaining money or property by fraud in connection to \$250,000, or imprisonment for up to 20 years, or both.
/s/ Car	ol D Thomas	
	Thomas re of Debtor 1	Signature of Debtor 2
Date I	February 17, 2020	Date
Did you ■ No □ Yes	attach additional pages to <i>Your Sta</i>	ment of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you ■ No	pay or agree to pay someone who i	not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Fill in this information				1
Debtor 1	carol D Thomas	case:		
Debior i	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	NORTHERN DIS	STRICT OF OHIO	
Case number				
(if known)				☐ Check if this is an amended filing
Official For Statemen		n for Indiv	viduals Filing Under Chapt	er 7 12/15
you have lease You must file this whichev on the fo	ver is earlier, unless the orm ople are filing together d date the form.	ind the lease has rithin 30 days after le court extends the in a joint case, but le. If more space in the inter (if known).	not expired. If you file your bankruptcy petition or by the date so the time for cause. You must also send copies to the oth are equally responsible for supplying correct in some supplying correct in the company of	ne creditors and lessors you list
For any credito information bel	rs that you listed in Pa	art 1 of Schedule [D: Creditors Who Have Claims Secured by Propert What do you intend to do with the property tha secures a debt?	
				uo oxompi on concumo ox
Creditor's De	eja Vu LLC		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt:	2008 Dodge Calbe miles	r 130000	 ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	■ Yes
For any unexpired in the information	below. Do not list rea	ase that you listed al estate leases. Ur	I in Schedule G: Executory Contracts and Unexpir nexpired leases are leases that are still in effect; the the trustee does not assume it. 11 U.S.C. § 365(p)	he lease period has not yet ended.
Describe your ur	nexpired personal pro	perty leases		Will the lease be assumed?
Lessor's name:	Value Housing	J LLC		□ No
				■ Yes
Description of least Property:	sed Residential lea	ise agreement		
Part 3: Sign Be	elow			
Official Form 108		Statement of I	ntention for Individuals Filing Under Chapter 7	page :

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Best Case Bankruptcy

Debto	or 1 Carol D Thomas	Case number (if known)
	penalty of perjury, I declare that I have ind rty that is subject to an unexpired lease.	licated my intention about any property of my estate that secures a debt and any personal
x /	/s/ Carol D Thomas	x
(Carol D Thomas	Signature of Debtor 2
5	Signature of Debtor 1	
	Date February 17, 2020	Date

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Best Case Bankruptcy

Fill in	n this information to identify your case:					only as c	lirected in this form and	in Form
Debt	tor 1 Carol D Thomas				2A-1Supp:			
Debt (Spou	tor 2se, if filing)			1	1. There	is no pres	umption of abuse	
Unite	ed States Bankruptcy Court for the: Northern District o	f Ohio		'	applie	s will be r	to determine if a presun made under <i>Chapter 7 I</i>	
1	e number			.		`	icial Form 122A-2).	
(if kno	wn)						does not apply now be y service but it could ap	
					☐ Check i	f this is a	in amended filing	
Off	icial Form 122A - 1							
	apter 7 Statement of Your Cur	rent l	Mor	othly Inc	ome			12/19
<u> </u>	apter 7 Statement of Tour Our		14101	itiliy iiic	OIIIC			12/13
attach case i qualif Part	•	which the a m a presur ption from	ddition	nal information a of abuse becau	ipplies. On t se you do no	ne top of a ot have pri	ny additional pages, writ marily consumer debts o	e your name and r because of
1.	What is your marital and filing status? Check one on	ıly.						
	Not married. Fill out Column A, lines 2-11.							
	\square Married and your spouse is filing with you. Fill ou	ıt both Co	lumns	A and B, lines	2-11.			
	$\hfill\square$ Married and your spouse is NOT filing with you.	You and	your s	spouse are:				
	☐ Living in the same household and are not lega	illy separ	ated. F	ill out both Co	lumns A an	d B, lines	2-11.	
	☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legiving apart for reasons that do not include evadir	egally sep	arated	l under nonban	kruptcy law	that appli	es or that you and your	
10 the	Il in the average monthly income that you received from all 101 (10A). For example, if you are filing on September 15, the 6-me 6 months, add the income for all 6 months and divide the total louses own the same rental property, put the income from that p	onth period by 6. Fill in	d would the res	be March 1 throusult. Do not include	ugh August 3 de any incom	1. If the amo	ount of your monthly incompore than once. For example	ne varied during le, if both
					Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).			·	\$	0.00	\$	
	Alimony and maintenance payments. Do not include Column B is filled in.	. ,		·	\$	0.00	\$	
4.	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	Include r	egular pender	contributions nts, parents,	\$	0.00	\$	
5.	Net income from operating a business, profession,	or farm						
				tor 1				
	Gross receipts (before all deductions)	· ·	0.00					
	Ordinary and necessary operating expenses	·	0.00					
	Net monthly income from a business, profession, or farm	m \$	0.00	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property			14				
		•		tor 1				
	Gross receipts (before all deductions)	·	0.00					
	Ordinary and necessary operating expenses Net monthly income from rental or other real property	· · —	0.00	Copy here ->	¢	0.00	\$	
1	NEL MONTHLY INCOME TROM TENTAL OF OTHER TEAL DROBERTY	*	J. J.	~~~~ IICIC ">	412	v.vv	w	

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 1

0.00

Best Case Bankruptcy

7. Interest, dividends, and royalties

				Column A Debtor 1		Column E Debtor 2 non-filing	or	
8.	Unemployment compensation			\$	0.00	\$	5 - 1	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	received was a benefit	under	·				-
	For you\$	0.0	0					
	For your spouse \$		_					
	Pension or retirement income. Do not include any ambenefit under the Social Security Act. Also, except as so not include any compensation, pension, pay, annuity, or United States Government in connection with a disability disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that process of the transfer of the uniformed service pay paid under chapter 61 of title 10, then include that process of the transfer of the uniformed service pay to which you if retired under any provision of title 10 other than chapter of the uniform that the process of the uniform that the uniform	tated in the next senten r allowance paid by the ry, combat-related injury es. If you received any pay only to the extent the would otherwise be en er 61 of that title.	ce, do / or retired pat it	\$	0.00	\$		
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social Streceived as a victim of a war crime, a crime against hur domestic terrorism; or compensation, pension, pay, and United States Government in connection with a disabilit disability, or death of a member of the uniformed service sources on a separate page and put the total below.	Security Act; payments manity, or international on muity, or allowance paid y, combat-related injury	or by the / or					
	Food Assistance		_	\$	133.00	\$		-
				\$	0.00	\$		-
	Total amounts from separate pages, if any.		+	\$	0.00	\$		-
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the to		\$	133.00	+ \$		= \$_	133.00
		J					Total	current monthly
Part	2: Determine Whether the Means Test Applies to	o You						
12	Calculate your current monthly income for the year.	Follow these stens:						
	12a. Copy your total current monthly income from line 1	•		Con	y line 11 h	ere=>	\$	133.00
	12a. Sopy your total outlent monthly moonle non-line	' '		ООР	yc	.0.0_2	Ψ	133.00
	Multiply by 12 (the number of months in a year)						×	12
	12b. The result is your annual income for this part of the	e form				12	2b. \$	1,596.00
13.	Calculate the median family income that applies to	you. Follow these steps	3:					
	Fill in the state in which you live.	ОН						
	Fill in the number of people in your household.	1						
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link sp	ecified i	n the separa	ate instruct	13 ions	3. \$	50,384.00
14.	How do the lines compare?							
	Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official	Form 122A-2.						400.4.0
	14b. ☐ Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2.	of page 1, check box 2,	The pre	esumption of	abuse is d	determined	by Form	122A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury	that the information on	this sta	tement and	in any atta	chments is	true and	correct.
	X /s/ Carol D Thomas							
	Carol D Thomas							
	Signature of Debtor 1							
	Date February 17, 2020							

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 2 Best Case Bankruptcy

Debtor 1	Carol D Thomas	Case number (if known)		
	MM/DD/YYYY			
	If you checked line 14a, do NOT fill out or file Form 122A-2.			

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 08/01/2019 to 01/31/2020.

Line 10 - Income from all other sources

Source of Income: Food Assistance

Income by Month:

6 Months Ago:	08/2019	\$133.00
5 Months Ago:	09/2019	\$133.00
4 Months Ago:	10/2019	\$133.00
3 Months Ago:	11/2019	\$133.00
2 Months Ago:	12/2019	\$133.00
Last Month:	01/2020	\$133.00
	Average per month:	\$133.00

Non-CMI - Social Security Act Income

Source of Income: **SS** Income by Month:

meonic of monen.		
6 Months Ago:	08/2019	\$771.00
5 Months Ago:	09/2019	\$771.00
4 Months Ago:	10/2019	\$771.00
3 Months Ago:	11/2019	\$771.00
2 Months Ago:	12/2019	\$771.00
Last Month:	01/2020	\$783.00
	Average per month:	\$773.00

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$24	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$33	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form

s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Northern District of Ohio

In re	Carol D Thomas		Case No.				
		Debtor(s)	Chapter	7			
	DISCLOSURE OF COMP	ENSATION OF ATTORN	EY FOR DE	EBTOR(S)			
(ompensation paid to me within one year before the fi	nt to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that a nsation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or lered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
	For legal services, I have agreed to accept		\$	300.00			
	Prior to the filing of this statement I have receive	d	\$	300.00			
	Balance Due			0.00			
2. 7	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	I have not agreed to share the above-disclosed cor	mpensation with any other person unl	ess they are mem	bers and associates of my law firm.			
	☐ I have agreed to share the above-disclosed compet copy of the agreement, together with a list of the r						
5.	n return for the above-disclosed fee, I have agreed to	render legal service for all aspects o	f the bankruptcy c	ease, including:			
l C	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. 						
6. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.							
		CERTIFICATION					
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.							
F	ebruary 17, 2020	/s/ Rebecca K. Hock	enberry				
D	ate	Rebecca K. Hocken Signature of Attorney	berry				
		Thompson & Hocke	nberry Co., LP	A			
		371 Lexington Aven	ue				
		Mansfield, OH 4490 (419) 522-5297 Fax		5			
		rebecca@attyTH.co		-			
		Name of law firm					

United States Bankruptcy Court Northern District of Ohio

In re	Carol D Thomas		Case No.						
		Debtor(s)	Chapter	7					
VERIFICATION OF CREDITOR MATRIX									
The abo	ove-named Debtor hereby verifies	that the attached list of creditors is true and co	orrect to the best	of his/her knowledge.					
Date:	February 17, 2020	/s/ Carol D Thomas							
		Carol D Thomas							
		Signature of Debtor							

Aaron's Inc. 892 N. Lexington - Springmill Rd Mansfield, OH 44906

Acceptance Now Insurance 5501 Headquarters Drive Plano, TX 75024

Balliett, Richard 782 Lexington Ave. Mansfield, OH 44907

Bayer Jerger & Underwood 362 Lexington Ave Mansfield, OH 44907

Buckeye Carpet 803 Joselyn Ave Mansfield, OH 44904

Bureau of Motor Vechicles 3833 S. High Street Columbus, OH 43207

Capital One Card Services PO box 9600 Carol Stream, IL 60128

Cashland 871 Ashland Road Mansfield, OH 44905

Cbe Group 131 Tower Park Drive Suite 100 Waterloo, IA 50704

Cbe Group Attn: Bankruptcy Po Box 900 Waterloo, IA 50704

Chase PO Box 6294 Carol Stream, IL 60197 Check Into Cash 703 Harding Way E Galion, OH 44833

Check-N-Go 991 Ashland Rd Mansfield, OH 44905

Columbia Gas (p) 290 W. Nationwide Blvd. 5th Fl. Bankruptcy Department Columbus, OH 43215-4157

Community Action Commission PIPP Program 597 Park Avenue Mansfield, OH 44902

Community Action Commission PIPP Program 297 Park Avenue Mansfield, OH 44902

Deja Vu LLC dba Universal Motors 320 Park Avenue East Mansfield, OH 44905

Directions Credit Union 340 W. Main St. Mansfield, OH 44904

Dish Network PO Box 94063 Palatine, IL 60094

Enhance Recovery Corp Po Box 57547 Jacksonville, FL 32241

Enhanced Recovery Corp Attn: Bankruptcy 8014 Bayberry Road Jacksonville, FL 32256 Fingerhut PO Box 166 Newark, NJ 07101

Ginnys/Swiss Colony Inc 1112 7th Ave Monroe, WI 53566

Ginnys/Swiss Colony Inc Attn: Credit Department Po Box 2825 Monroe, WI 53566

Gordon Food Service p o box 1787 Grand Rapids, MI 49501-1787

Hobby Lobby 909 N. Lexington-Springmill RD Mansfield, OH 44906

Huntington National Bank PO Box 182387 Columbus, OH 43218

James A. Fischer 2372 Lakecrest Dr. Mansfield, OH 44903

JoAnn Fabrics 594 N. Lexington Springmill Rd Mansfield, OH 44906-3823

JPMorgan Chase Bank, NA P O Box 182051 Columbus, OH 43218-2051

Kroger Dept 86130 Oaks, PA 19456

L.O.W. Enterprises LLC P O Box 1097 Mansfield, OH 44903

Mansfield Municipal Court 30 N. Diamond Street Mansfield, OH 44902

Mechanics Bank Cardmember Serv PO Box 790408 Saint Louis, MO 63179

MedCentral Hospitals/ OhioHealth PO BOx 713008 Cincinnati, OH 45271-3008

Ohio Edison PO Box 3687 Akron, OH 44308-1890

Ohio Eye Associates 466 S Trimble Road Mansfield, OH 44906

Plaza Services, LLC 110 Hammond Drive Suite 110 Atlanta, GA 30328

Plaza Services, LLC 110 Hammond Drive Suite 110 Atlanta, GA 30328

Quaina Thomas 139 Blanch St. Mansfield, OH 44903

Reip's Appliance LLC 605 Springmill Street Mansfield, OH 44903

Rent-A-Center 532 N. Lex-Springmill Rd. Mansfield, OH 44906

Richland County Auditor 50 Park Avenue East Mansfield, OH 44902

Spectrum / Time Warner Cable Attn: Recovery Support 3347 Platt Springs Road West Columbia, SC 29170

Stanley Steemer Carpet Cleaner 1231 Park Avenue East Mansfield, OH 44905

State Farm Insurance Companies PO Box 3020 Newark, OH 43058-3020

Time Warner Cable PO Box 2553 Columbus, OH 43216-2553

United Acceptance, Inc. 2400 Lake Park Dr Smyrna, GA 30080

United Acceptance, Inc. Attn: Bankruptcy 2400 Lake Park Dr Se, Ste 100 Smyrna, GA 30080

US Bank U.S. Bankcorp Center 800 Nicollet Mall Minneapolis, MN 55402

Vester L. Morrison, Inmate A704465 c/o Marion Correctional Institution PO Box 57 Marion, OH 43302

Walmart/Synchrony Bank PO Box 530927 Atlanta, GA 30353

Weltman, Weinberg & Reis Co., LPA 323 W. Lakeside, Ste. 200 Cleveland, OH 44113-1009

Woodforest National Bank 1330 Lake Robbins Drive Spring, TX 77380

Wrights Refuse Removal Service 1861 Lexington-Springmill Rd. S Mansfield, OH 44904